

2005 BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM Arthritis Fact Sheet

In General

- The word arthritis applies to more than 100 different conditions of unknown or varied causes.
- Joint involvement is the most characteristic aspect of arthritis, but various forms can also result in such problems as kidney disease, blindness, and premature death.
- Arthritis causes pain, loss of movement, and sometimes swelling of joints and tissues.
- Common forms of arthritis include: Osteoarthritis, Rheumatoid Arthritis, Fibromyalgia, Gout, Ankylosing Spondylitis, Juvenile Arthritis, Systemic Lupus Erythematosus also known as Lupus or SLE, and Scleroderma.

ARTHRITIS

In this report

- Arthritis is defined as doctor-diagnosed arthritis.
- *Doctor-diagnosed arthritis* refers to those adults 18 years or older in the state of Missouri who self report “Yes” to the Behavioral Risk Factor Surveillance System (BRFSS) survey question¹: “Have you ever been told by a doctor or other health care professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or Fibromyalgia?”

What is it?

This publication was supported by CDC Grant/Cooperative Agreement Number 03022, Missouri Arthritis & Osteoporosis Program & Behavioral Risk Factor Surveillance Project, Cooperative Agreement Number U58/CCU722795-04. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.

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ARTHRITIS in Missouri

• In 2005, an estimated **1.38 million adults** (32%) reported having arthritis. This is an approximately six percent increase over the 2003 estimate of 1.28 million (30.1%). By 2030, the Centers for Disease Control projects there to be 1.72 million adults with arthritis. This is an estimated **25% increase** from 2005².

• **More women than men** reported having arthritis (women: 36% men: 28%).

• The prevalence of arthritis **increases with age**. Adults aged 65 and older were 3.75 times more likely than adults 18-44 to report having arthritis (see FIGURE 1).

• Arthritis was more prevalent among **non-Hispanic white adults** (see FIGURE 2).

• 46% of adults with less than a high school education, 35% of adults with a high school education, and 28% of adults with more than a high school education reported having doctor diagnosed arthritis.

Individuals with ARTHRITIS

• Approximately **40%** of both men and women with doctor-diagnosed arthritis reported **activity limitations** due to their arthritis (men 41%, women 40%).

• Over **2/3** of those who reported having doctor-diagnosed arthritis reported being either obese or **overweight** (obese 35%, overweight 37%).

• Over **50%** of those with doctor-diagnosed arthritis reported obtaining **less than recommended levels of physical activity** (see FIGURE 3).

• **33%** of adults with arthritis state they are in fair or **poor health**.

FIGURE 1: The prevalence of doctor-diagnosed arthritis by age, 2005 BRFSS³

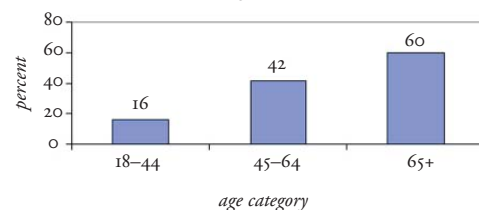


FIGURE 2: The prevalence of doctor-diagnosed arthritis by race/ethnicity, 2005 BRFSS³

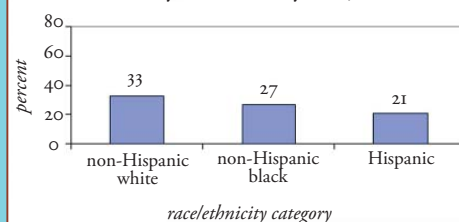
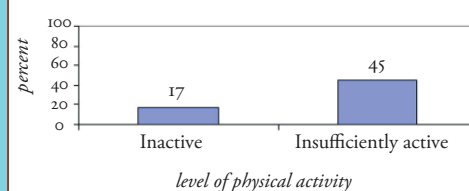
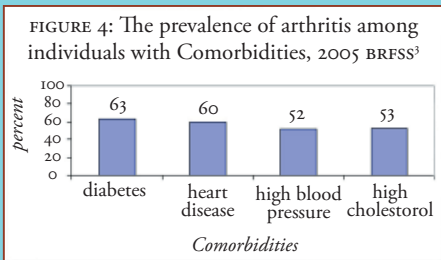


FIGURE 3: The prevalence of physical inactivity among individuals who report having doctor-diagnosed arthritis, 2005 BRFSS³

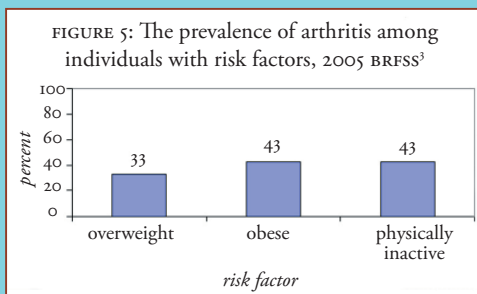


Individuals with Comorbidities/Conditions



- Over 50% of adults who reported having **diabetes, heart disease, high blood pressure, or high cholesterol** also reported having arthritis (see FIGURE 4).

- Over 70% of adults who reported being **overweight** or **obese** reported having arthritis (see FIGURE 5).



- 43% of adults who reported being **physically inactive** reported having arthritis (see FIGURE 5).

diabetes
heart disease
high blood pressure
high cholesterol

Management of ARTHRITIS Symptoms

- Of adults with arthritis:

- * 68% can do everything or most things they want to do;
- * 32% can do some of the things or hardly anything they want to do;
- * 34% have been told by their doctor to lose weight;
- * 60% have been told by their doctor to exercise.

- Only 10% of adults with arthritis have taken a course or class to manage their arthritis.

lose weight
exercise
take a class

ARTHRITIS Courses

The Regional Arthritis Centers of the Missouri Arthritis Program currently offer four different evidence-based courses targeted towards individuals with arthritis (Chronic Disease Self-Management, Arthritis Foundation Exercise Program, Arthritis Foundation Aquatics Program, Arthritis Foundation Self Help Program).

- 1.** **Chronic Disease Self-Management Program (CDSMP)** is an effective self-management education program for people with chronic health problems. The program specifically addresses arthritis, diabetes, and lung and heart disease, but teaches skills useful for managing a variety of chronic diseases. This program was developed at Stanford University. CDSMP workshops are held in community settings and meet 2 1/2 hours per week for 6 weeks. Workshops are facilitated by two trained leaders, one or both of whom are non-health professionals with a chronic disease themselves. This program covers topics such as: techniques to deal with problems associated with chronic disease; appropriate exercise; appropriate use of medications; communicating effectively with family, friends, and health professionals; nutrition; and how to evaluate new treatments. Participants who took CDSMP demonstrated significant improvements in exercise, communication with physicians, self-reported general health, health distress, fatigue, disability, and social/role activities limitations.

- 2.** **Arthritis Foundation Exercise Program (AEP)** is a community-based recreational exercise program developed by the Arthritis Foundation. Trained AEP instructors cover a variety of range-of-motion and endurance-building activities, relaxation techniques, and health education topics. All of the exercises can be modified to meet participant needs. The program's demonstrated benefits include improved functional ability, decreased depression, and increased confidence in one's ability to exercise. Classes typically meet two or three times per week.

- 3.** **Arthritis Foundation Aquatics Program** is a water exercise program created by the Arthritis Foundation for people with arthritis and related conditions. The classes are conducted by a trained instructor and are designed to improve flexibility, joint range of motion, endurance, strength, daily function and to decrease pain. The aquatics classes include joint range of motion, stretching, breathing, and light aerobic activities. The classes typically meet two or three times per week for one hour.

- 4.** **Arthritis Foundation Self Help Program** is an effective self-management education intervention for people with arthritis. Developed by Dr. Kate Lorig of Stanford University, the course helps people learn and practice the different skills needed to build an individualized self-management program and gain the confidence to carry it out. The 6-week course consists of weekly 2-hour sessions guided by two trained instructors who follow a detailed protocol. There is a robust science base that demonstrates the positive impacts of participation in the Arthritis Foundation Self-Help Program: participants report a 20% decrease in pain and a 40% decrease in physician visits, even 4 years after course participation.

Moving Forward

- In order to help the citizens of Missouri who are affected by Arthritis, there are seven regional centers located throughout the state to assist individuals, families, and others affected by arthritis.
- To locate Regional Arthritis Center (RAC) services in your area and to find out what is happening in your area, please go to <http://www.martrc.org/community/regional.html>.



Citations & References

¹*Arthritis: Data & Statistics*. Retrieved June 6, 2007 from http://www.cdc.gov/arthritis/data_statistics/case_def.htm.

²*Errata*. Vol. 56, No. 17. [Electronic version] MMWR; 56:608–610.

³Centers for Disease Control & Prevention. *Summary data: Adults 18 years & older with doctor-diagnosed arthritis (DRDX+)*. BRFSS 2005.

Missouri Arthritis & Osteoporosis Program. *2003 Behavioral Risk Factor Surveillance System Arthritis Fact Sheet*. Missouri: Department of Health & Senior Services.

for more information

<http://www.dhss.mo.gov/Arthritis/index.html>

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